PTO/S8/06-(08-03) -Approved for use through 7/31/2006, OMB 0651-0032

Γ	P/	WORK REDUCTION AC ATENT APPL	ICATIC	N FFF DET	GUITED NO TESPOR	ON DECORD	information un	ess it de	days a valid OM	control numb
H			Subs	litute for Form P	ON RECORD	· · · ·	Application or Booklet Number			
_	· · · · ·		S FILE	D - PARTI	SMALI	SMALL ENTITY		OR OTHER THAN SMALL ENTITY		
DASK SEE					BER'EXTRA.	RATE		1	RATE	FEE
. (3	7 CFR 1.15(a))			***			3.	OR		1.
	TAL CLAIMS CFR 1.16(d)		minus 20 =					1 ·		+
	DEPENDENT CL CFR 1.16(b))	AMS .	minus	,			 	OR	× 5	
M	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					× • =	 	OR	X 5 =	-
	•					J L*:	 	OR:	.+5=	.:
. 11	* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL	
1	7-2176	CLAIMS AS AN	VENDE) – PART II						
クー	SI-OR	· (Calumn 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR		R THAN ENTITY
MENDMENT 4		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL		RATE	ADDI- TIONAL
Ž	Total (37 OFR 1,16(c))	1.74	Minus	20		X 5 =	FEE			FEE
EZ	(3) CFR 1,16(b))	1.3	Minus	- 3			 	OR	X' \$ =	 -
ξ		TATION OF MULTIPLE	E DEPEND	ENT CLAUL CO.C.	C	X s=		QR	X S =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL		OR	+5	
						ADD'L FEE		OR	ADOL FEE	
	w.loulou	(Column 1)		(Column 2)	(Column 3)				,	\top
ENT	AMSB	CLAIMS REMAINING AFTER AMENDMENT		. HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL' FEE		RATE	ADDI- TIONAL FEE
暠	Total (37 OFR 1,14(4)	. 14	Minus	. 20	•1	. ×s =	·	OR	X 5 =	ree
AMENDMENT	Independent (37 CFR 1,16(b))	. 3	Minius	··· (3	7	X 5 . =				
	FIRST PRESENT	بدائل: وح صررابام	E DEPENDI	ENT CLAM 137 CF	S 1 1decu			OR	x s=	
			-			TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Cotumn 2)	(Column 3)					
LN		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ŖATE	ADDI: TADNAL		. RATE	ADDI- TIONAL
Ž	Total (3) CFA 1.16(cl)	•	Minus	*	•	1	FEE	ŀ		FEE
MENDMENT	Independent (37 CFR 1 16(bg)	•	Minus	•••		× 5		OR	× \$=	
ş	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 1649)					X 5 2	<u>-</u>	OR	x s=	· ·
Ľ	· · · · · · · · · · · · · · · · · · ·	ATION OF MULTIPLE	UEPENDE	NT CLAIM 137 CFF	t 1G(a))	+s =		ogr	+ 5	•
	If the entruir	Vienn 1 er foan et :		•		ADO'L FEE		OR	TOTAL ADOL FEE	
	HINE PRODUCT	dumn 1 is less than lumber Previously	Duden	IN THIS COLOR !			•			
	II INE Trighesi N	lumber Previously	Paid For	IN THIS SPACE is	less than 3, em	er '3'.				

"If the Trighest Number Previously Paid For' IN THIS SPACE is less than 3, enter 13.

The "Highest Number Previously Paid For' [Total or Independent] is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fide (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on time amount of time, you require to complete this form and/or suggestions for reducing this burden, should be sent to the Clief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.